



P/2613-41
(AUT/008)

Applicants : Michael Lax et al.
Application No. : 09/858,457 Confirmation No. 1750
Filed : May 16, 2001
For : CASE WITH INTERNAL LOCK
Group Art Unit : 3676
Examiner : Lloyd A. Gall

New York, New York 10020
December 10, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATION

"Express Mail" Mailing Label No. EV133102566US
Date of Deposit: December 10, 2003

I hereby certify that this certification and
the following papers and fees:

1. Transmittal Letter (3 pp., in duplicate);
2. Supplemental Reply to Office Action (9
pp); and
3. Return postcard

are being deposited with the United States Postal Service
"EXPRESS MAIL POST OFFICE TO ADDRESSEE" service under 37
C.F.R. § 1.10 on the date indicated above and are
addressed to Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450.


Name: Julian Garcia

RECEIVED
DEC 16 2003
GROUP 3600



12-12-03

3676

Express Mail No. EV133102566US
P/2613-41
(AUT/008)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Michael Lax et al.
Application No. : 09/858,457 Confirmation No. : 1750
Filed : May 16, 2001
For : CASE WITH INTERNAL LOCK
Group Art Unit : 3676
Examiner : Lloyd A. Gall

New York, New York
December 10, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
DEC 16 2003
GROUP 3600

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☐ a Preliminary Amendment;
☒ a Supplemental Reply to Office Action; ☐ a Declaration;
☐ a Power of Attorney; ☐ a Submission of Formal Drawings;
☐ formal drawings; to be filed in the above identified
patent application; ☒ an Express Mail Certification (Express
Mail Label No. EV1333102566US).

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.
☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR			PRESENT EXTRA		RATE	ADDITIONAL FEES	
TOTAL CLAIMS	6	-	81	*	=	0	X	\$18	=	\$ 0.00
INDEPENDENT CLAIMS	6	-	13	**	=	0	X	\$86	=	\$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						+		\$290	=	\$ 0.00
								TOTAL		\$0.00
* If less than 20, insert 20.										
** If less than 3, insert 3.										

- [] A check in the amount of \$_____ in payment of the additional claims is transmitted herewith.
- [] Please charge \$_____ to Deposit Account No. _____ in payment of the filing fee.
- [X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- [] The following extension is applicable to the Reply filed herewith; [] \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$1480.00 extension fee for

response within fourth month pursuant to 37 C.F.R.
§ 1.136 (a); ☐ \$2010.00 extension fee for response
within fifth month pursuant to 37 C.F.R. 1.136(a).

☐ Please charge the ☐ \$110.00; ☐ \$420.00;
☐ \$950.00; ☐ \$1480.00; or ☐ \$2010.00 extension
fee to Deposit Account No. _____. A duplicate
copy of this transmittal letter is transmitted
herewith.

☒ The Director is hereby authorized to charge payment of
any additional fees required under 37 C.F.R. § 1.17 in
connection with the paper(s) transmitted herewith, or to
credit any overpayment of same, to Deposit Account No.
06-1075. A duplicate copy of this transmittal letter is
transmitted herewith.

Respectfully submitted,



Edward M. Arons
Registration No. 44,511
Agent for Applicants
FISH & NEAVE
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1105
Tel.: (212) 596-9000
Fax: (212) 596-9090